

KNIGHTDALE PARKS AND RECREATION
2016 YOUTH BASKETBALL BOYS SUMMER LEAGUE

Age Divisions

9-10 YR. OLD BOYS
11-12 YR. OLD BOYS
13-14 YR. OLD BOYS
15-17 YR. OLD BOYS

***MUST BE 9 AS OF 5/1/16**

- AGES ARE DETERMINED AS OF MAY 1, 2016
- AGE GROUP. FEES FOR ALL DIVISIONS ARE **(\$37) RESIDENT AND (\$52) NON-RES.**
- THERE WILL BE A (\$5) LATE FEE FOR ALL FORMS TURNED IN AFTER DEADLINE

REGISTRATION: **April 1-15, 2016**
Mail to or Drop off @ Knightdale Parks and Recreation
950 Steeple Square Ct.
Knightdale, NC 27545

Online @ <http://www.knightdalenc.gov/index.aspx?page=693>

****Important Date Information****

Skills Evaluation: Every player must attend the skills evaluation. Players who do not attend the skills evaluation will be drafted blindly. (their names pulled out of a hat)

The Skills Evaluation will be held, May 2 & 4 at Forestville Rd. Elementary Gym.

Monday May 2nd

13-14 Boys 6pm-7pm
15-17 Boys 7:30pm-8:30pm

Wednesday May 4th

9-10 Boys 6pm-7pm
11-12 Boys 7:30pm-8:30pm

Practices should begin the middle of May

FOR INFORMATION CALL J.P. Lefever, 919-217-2238

E-mail john.lefever@knightdalenc.gov

RESIDENT	NON-RESIDENT	CASH	CHECK #	CC #	
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KNIGHTDALE PARKS AND RECREATION DEPARTMENT 2016 SUMMER BOYS BASKETBALL REGISTRATION

(PLEASE **PRINT** CLEARLY)

PLAYER NAME: _____ DATE OF BIRTH: ____/____/____ SEX: M F

AGE AS OF *5/1/16 _____ **SHIRT SIZE:** AS AM AL AXL AXXL(BOYS ONLY)

PARENT/GUARDIAN: (**PRINT**) _____ DOB ____/____/____

MAILING ADDRESS: _____ **CITY:** _____ **ZIP:** _____

Primary PH: _____ Contact Name _____

Secondary PH _____ Contact Name _____

E-Mail _____

PLEASE INDICATE CORRECT AGE DIVISION
(AGE IS DETERMINED AS OF MAY 1, 2016)*

____ 9-10 YR. OLD BOYS

____ 11-12 YR. OLD BOYS

____ 13-14 YR. OLD BOYS

____ 15-17 YR. OLD

PARENTS: I WOULD LIKE TO VOLUNTEER AS: ____ HEAD COACH ____ ASST. COACH

I, the parent/guardian of the above named player do hereby give permission for his/her participation in the 2016 youth basketball league sponsored by the Knightdale Parks and Recreation Department. I understand that participation in this recreational program involves a certain amount of risk and that it is recommended that my child have a complete physical before participating in this activity.

I agree to release, indemnify and hold harmless the Town of Knightdale, Knightdale Parks and Recreation Department, Wake Count Schools, and the coaches/volunteers acting on behalf of the recreation department from any and all liability which may result from participation in the above named program. I agree to follow all rules and procedures of the program and to follow the reasonable instructions of coaches, league officials, and representatives of the parks and recreation department.

I hereby authorize treatment by a qualified and licensed medical doctor in the event of a medical emergency which, in the opinion of the attending physician, may endanger my child's life, or cause disfigurement, physical impairment, or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me.

I agree to allow The Town of Knightdale to use videotape, audio, or photographic material for the purpose of promotional materials for the Town of Knightdale programs and services. This includes any print material, broadcast and print advertising, promotional videos EWTN 22, Total Connection, web news and the town website.

SIGNATURE OF PARENT/GUARDIAN

DATE